

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER		8 10-13-93
EXAMINER	308	10/15/93
TYPIST	343	10/18/93
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

85  
10/18/93

# INDEX OF CLAIMS

Claim	Date
Final Original	
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
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47	47
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50	50

SYMBOLS  
✓ Rejected  
- Allowed  
- (Through numeral) Canceled  
+ Restricted  
N Non-elected  
I Interference  
A Appeal  
O Objected

Claim	Date
Final Original	
51	51
52	52
53	53
54	54
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56	56
57	57
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61	61
62	62
63	63
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100	100

BEST AVAILABLE COPY

(LEFT INSIDE)